Approved for use through 10/31/2002. OMB 0651-0032

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## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.  First Inventor Linds			7784-000645 la J. Sprague					
			D7 (00 50 50 0 1770					

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

			-		7					
		ICATION ELI		ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450						
See MPEP o	chapter 600 conce	eming utility patent a	application contents.	P.O. Box 1450 Alexandria, VA 22313-1450						
2.	Submit an original ar Applicant claims See 37 CFR 1.2 Specification preferred arrange Descriptive title o Cross Reference	To ment set forth below of the Invention s to Related Applica	otal Pages 13 ]  Specification filed in English	<ul> <li>7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</li> <li>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</li> <li>a.  Computer Readable Form (CRF)</li> <li>b. Specification Sequence Listing on: <ul> <li>i.  CD-ROM or CD-R (2 copies); or</li> <li>ii.  paper</li> </ul> </li> </ul>						
		ding Fed sponsored Juence listing, a tabl			c. Statements verifying identity of above copies					
	or a computer pro	ogram listing append		ACCOM	ACCOMPANYING APPLICATIONS PARTS					
- - -	Detailed Descript Claim(s)	f the Invention of the Drawings <i>( if</i> tion	filed)	10. 37 C.F.F	Assignment Papers (cover sheet & document(s))  37 C.F.R.§3.73(b) Statement Power of (when there is an assignee)  Attorney					
-	Abstract of the D	isciosure		11. English	English Translation Document (if applicable)					
	Prawing(s) ( <i>35 L</i> Declaration	· -	otal Sheets 3 ]		Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
		ed (original or cop	· — ·		ary Amendment					
b. 🔲	Copy from a p	rior application (3	7 CFR 1.63 (d))		Return Receipt Postcard (MPEP 503)					
_	_'		th Box 18 completed)		(Should be specifically itemized)  15. Certified Copy of Priority Document(s)					
i. <b>L</b>		OF INVENTOR ent attached deleting			(if foreign priority is claimed)					
_		rior application, see		<ol> <li>Request and Non Publication under 35 U.S.C. 122</li> <li>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</li> </ol>						
6.	plication Data S	heet. See 37 CF	R 1.76	· — ·						
				y the requisite informat	on below and in a	a preliminary amendment,				
or in an App ☐ Conti		<i>neet under 37 CFR</i> ☐ Divisional	1.76: Continuation-in-part	(CIP) of	orior application N	0. /				
Prior app	plication information	on: Examin	er	Gn	oup / Art Unit:	_				
under Box 5	5b, is considered	l a part of the discl	r: The entire disclosure of osure of the accompany on a portion has been inc	ing or divisional applic	ation and is here	ath or declaration is supplied by incorporated by reference application parts.	i ).			
			17. CORRESPON	IDENCE ADDRESS						
☑ Custon	ner Number or Ba		275 Insert Customer No. or At	- <del>-</del>		orrespondence address below				
	Hamess, Dick	key & Pierce, P.L.	C.				"			
Name	Mark D. Elchu	uk								
	P.O. Box 828									
Address										
City	Bloomfield Hil	lls	State	МІ	Zip Code	48303				
Country	United States	of America	Telephone	248-641-1600 Fax 248-641-0270						
Name (Pr	int/Type)	Mark D. Elchuk	1	Registration No. (Attorney/Agent) 33,686						
Signature		Man	en al	Date Sept. 9, 2003			3			



TO/SB/17 (01-03)
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Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$) 790.00

Complete if Known							
Application Number	NEW FILING						
Filing Date							
First Named Inventor	Linda J. Sprague						
Examiner Name	Unknown						
Group / Art Unit	Unknown						
Attorney Docket No.	7784-000645						

METHOD OF PAYMENT (check all that apply)								т—			SEE C	ALOU ATION (continued)		
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1002	330	1		165 Design filling fee						320	2402	160	Filing a brief in support of an appeal	$\vdash$
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1203	280		2203	140		•	claim, if not pa		1801	750	2801	375	Request for Continued Examination (RCE)	
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**or nur	**or number previously paid, if greater; For Reissues, see above													

SUBMITTED BY

Complete (# applicable)

Name (Print/Type)

Mark D. Elchuk

Registration No, Attorney/Agent)

Signature

Date

EXPRESS MAIL NO. EL623597384US

Complete (# applicable)

Date

Date

Date